



General Assembly

February Session, 2006

***Raised Bill No. 5642***

LCO No. 2588

\*02588\_\_\_\_\_HS\_\*

Referred to Committee on Human Services

Introduced by:  
(HS)

***AN ACT CONCERNING PROGRAMS ADMINISTERED BY THE  
DEPARTMENT OF SOCIAL SERVICES.***

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 17b-80 of the general statutes is repealed and the  
2 following is substituted in lieu thereof (*Effective July 1, 2006*):

3 (a) The commissioner, upon receipt of an application for aid, shall  
4 promptly and with due diligence make an investigation, such  
5 investigation to be completed within forty-five days after receipt of the  
6 application or within sixty days after receipt of the application in the  
7 case of an application in which a determination of disability must be  
8 made. If an application for an award is not acted on within forty-five  
9 days after the filing of an application, or within sixty days in the case  
10 of an application in which a determination of disability must be made,  
11 the applicant may apply to the commissioner for a hearing in  
12 accordance with sections 17b-60 and 17b-61. The commissioner shall  
13 grant aid only if [he] the commissioner finds the applicant eligible  
14 therefor, in which case [he] the commissioner shall grant aid in such  
15 amount, determined in accordance with levels of payments established  
16 by the commissioner, as is needed in order to enable the applicant to

17 support himself, or, in the case of temporary family assistance, to  
18 enable the relative to support such dependent child or children and  
19 himself, in health and decency, including the costs of such medical  
20 care as [he] the commissioner deems necessary and reasonable, not in  
21 excess of the amounts set forth in the various fee schedules  
22 promulgated by the [Commissioner of Social Services] commissioner  
23 for medical, dental and allied services and supplies or the charges  
24 made for comparable services and supplies to the general public,  
25 whichever is less, and the cost of necessary hospitalization as is  
26 provided in section 17b-239, as amended, over and above hospital  
27 insurance or other such benefits, including workers' compensation and  
28 claims for negligent or wilful injury. The commissioner, subject to the  
29 provisions of subsection (b) of this section, shall in determining need,  
30 take into consideration any available income and resources of the  
31 individual claiming assistance. The commissioner shall make periodic  
32 investigations to determine eligibility and may, at any time, modify,  
33 suspend or discontinue an award previously made when such action is  
34 necessary to carry out the provisions of the state supplement program,  
35 medical assistance program, temporary family assistance program,  
36 state-administered general assistance program or food stamps  
37 program. The parent or parents of any child for whom aid is received  
38 under the temporary family assistance program and any beneficiary  
39 receiving assistance under the state supplement program shall be  
40 conclusively presumed to have accepted the provisions of sections 17b-  
41 93, as amended, 17b-94 and 17b-95.

42 (b) (1) The commissioner, in making a determination for initial or  
43 continued eligibility for any program operated or administered by the  
44 Department of Social Services, shall, to the extent permitted by federal  
45 law, exclude as income to a program applicant or program beneficiary,  
46 any sums received by such person that are attributable to payments  
47 from the Department of Children and Families pursuant to section 17a-  
48 90 or 17a-126 of the 2006 supplement to the general statutes.

49 (2) The commissioner, in making a determination for initial or

50 continued eligibility for any program operated or administered by the  
51 department, shall exclude as income to a program applicant or  
52 beneficiary who receives a relative caregiver subsidy payment  
53 pursuant to section 17a-126 of the 2006 supplement to the general  
54 statutes, any earned income attributable to the child for whom the  
55 subsidy payment is made.

56 [(b)] (3) The commissioner shall disregard any earned income of a  
57 child who is a student in determining the eligibility, standard of need  
58 and amount of assistance of a family in the [TFA] temporary family  
59 assistance program.

60 (c) No person shall be eligible for the state supplement program  
61 whose assets as defined by the commissioner exceed sixteen hundred  
62 dollars or, if living with a spouse, whose combined assets exceed  
63 twenty-four hundred dollars.

64 Sec. 2. (NEW) (*Effective July 1, 2006*) (a) As used in this section,  
65 "hospital" means an establishment for the lodging, care and treatment  
66 of persons suffering from disease or other abnormal physical or mental  
67 conditions and includes inpatient psychiatric services in general  
68 hospitals; and "indigent person" means any person who is eligible for  
69 or who is receiving medical assistance benefits from the state, pursuant  
70 to section 17b-261 of the 2006 supplement to the general statutes.

71 (b) A hospital which receives payment from the state for rendering  
72 care to indigent persons shall ensure that any physicians group  
73 affiliated with such hospital does not discriminate on the basis of  
74 source of payment against indigent persons who seek medical  
75 treatment from such affiliated physicians group.

76 (c) Upon the receipt of a complaint concerning a violation of this  
77 section, the Department of Social Services shall conduct an  
78 investigation into such complaint.

79 (d) The Department of Social Services may decrease the

80 disproportionate share payment to any hospital with an affiliated  
81 physicians group found to have violated the provisions of this section.

82 (e) Prior to imposing any sanction, the Department of Social  
83 Services shall notify the hospital of the alleged violation and shall  
84 permit such facility to request an administrative hearing, in accordance  
85 with sections 4-176e to 4-181a, inclusive, of the general statutes. A  
86 hospital shall request such hearing not later than fifteen days after the  
87 date of receipt of the notice of alleged violation from the department.

88 (f) The Commissioner of Social Services shall adopt regulations, in  
89 accordance with the provisions of chapter 54 of the general statutes, to  
90 carry out the provisions of this section.

91 Sec. 3. (NEW) (*Effective July 1, 2006*) For the fiscal year ending June  
92 30, 2007, and each fiscal year thereafter, the Secretary of the Office of  
93 Policy and Management shall increase the compensation rate paid to  
94 private providers under contract with the state to provide services  
95 related to health and hospitals, human services, education and  
96 correction by an amount equal to the annual average increase paid to  
97 state employees providing the same or similar services during the  
98 previous biennium, as determined by the Secretary of the Office of  
99 Policy and Management.

100 Sec. 4. Section 17b-255 of the general statutes is repealed and the  
101 following is substituted in lieu thereof (*Effective July 1, 2006*):

102 (a) There is established, in the Department of Social Services, a  
103 program to provide insurance assistance for [people with AIDS]  
104 persons with acquired immunodeficiency syndrome or human  
105 immunodeficiency virus. Under the program the state shall pay  
106 insurance premiums for persons [with AIDS-related disease] with  
107 acquired immunodeficiency syndrome or human immunodeficiency  
108 virus who, without such assistance, would be unable to obtain health  
109 insurance coverage through an employer. [To qualify for assistance a  
110 person shall have a family income less than two hundred per cent of

111 the federal poverty level, shall have less than ten thousand dollars in  
112 cash assets and shall have health insurance which may be continued  
113 upon termination of employment of the applicant, the applicant's  
114 spouse or the applicant's parent.] Assistance shall be available to an  
115 applicant: (1) With income below four hundred per cent of the federal  
116 poverty level, and (2) who has health insurance that may be continued  
117 upon the termination of employment of the applicant, the applicant's  
118 spouse or the applicant's parent. Insurance premiums and medical  
119 expenses for which the applicant has no coverage, which are incurred  
120 in the month of application, shall be deducted from gross income for  
121 the purpose of determining income eligibility for the program.  
122 Eligibility shall be periodically redetermined and any uncovered  
123 medical expenses incurred in the month of redetermination shall be  
124 deducted from gross income in determining continued eligibility for  
125 the program. An applicant for assistance shall document the risk of  
126 losing health insurance and submit a physician's statement that the  
127 applicant has [an AIDS-related disease] acquired immunodeficiency  
128 syndrome or human immunodeficiency virus.

129 (b) The Commissioner of Social Services shall adopt regulations, in  
130 accordance with chapter 54, to implement the provisions of this  
131 section, which shall include the establishment of (1) higher income  
132 eligibility limits for applicants with dependents; (2) an application  
133 process for the program, including application forms; and (3) a  
134 procedure by which the insurance premiums of participants in the  
135 program shall be paid.

136 (c) Except as otherwise specified in this section, the insurance  
137 assistance for [people with AIDS] persons with acquired  
138 immunodeficiency syndrome or human immunodeficiency virus  
139 program shall be operated in a manner consistent with the Medicaid  
140 program.

141 (d) The Department of Social Services shall investigate the  
142 purchasing of a managed care insurance program in lieu of the

143 issuance of individual policies.

144       Sec. 5. (NEW) (*Effective July 1, 2006*) The Commissioner of Social  
145 Services shall, within available appropriations, establish and operate a  
146 pilot program that will allow not more than seventy-five persons with  
147 income that exceeds three hundred per cent of the federal  
148 supplemental security income limit who reside in a residential care  
149 home, but are at risk for being displaced from such home because of  
150 income which exceeds threshold limits or are making application for  
151 residence at a residential care home to reside in such home. The  
152 commissioner shall ensure that the annual per recipient cost to the  
153 state for participation in the pilot program shall not exceed the annual  
154 per recipient cost to the state for placement of the same individuals in  
155 nursing home facilities under the Medicaid program. Cost savings  
156 realized by the state through implementation of the pilot program  
157 shall be used to provide healthcare coverage, including prescription  
158 drug coverage to pilot program participants. Not later than January 1,  
159 2008, the Commissioner of Social Services shall report, in accordance  
160 with section 11-4a of the general statutes, to the select committee of the  
161 General Assembly having cognizance of matters relating to aging and  
162 to the joint standing committees of the General Assembly having  
163 cognizance of matters relating to human services, appropriations and  
164 the budgets of state agencies on such pilot program.

165       Sec. 6. (*Effective July 1, 2006*) The sum of \_\_\_\_ dollars is appropriated  
166 to the Office of Policy and Management, from the General Fund, for  
167 the fiscal year ending June 30, 2007, to provide an increase in the  
168 compensation rate paid by the state to private providers under  
169 contract with the state to provide services related to health and  
170 hospitals, human services, education and correction.

171       Sec. 7. (*Effective July 1, 2006*) The sum of \_\_\_\_ dollars is appropriated  
172 to the Department of Social Services, from the General Fund, for the  
173 fiscal year ending June 30, 2007, to transform the department's current  
174 Medicaid customer service center into a centralized call center that will

175 better service the needs of Medicaid beneficiaries.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>July 1, 2006</i>	17b-80
Sec. 2	<i>July 1, 2006</i>	New section
Sec. 3	<i>July 1, 2006</i>	New section
Sec. 4	<i>July 1, 2006</i>	17b-255
Sec. 5	<i>July 1, 2006</i>	New section
Sec. 6	<i>July 1, 2006</i>	New section
Sec. 7	<i>July 1, 2006</i>	New section

***Statement of Purpose:***

To: (1) Revise income eligibility procedures used by the Department of Social Services in program eligibility determinations, (2) prohibit physicians groups affiliated with hospitals that receive disproportionate share payments from discriminating against persons on the basis of source of payment, (3) increase payment rates to private providers contracting with the state for the provision of human services, (4) expand the availability of state insurance payments on behalf of persons with acquired immunodeficiency syndrome or human immunodeficiency virus, (5) establish a residential care home pilot program for persons with income that exceeds three hundred per cent of the federal supplemental security income limit, and (6) provide appropriations to the Department of Social Services for the establishment of a dedicated call center for Medicaid recipients.

*[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]*